## APPLICATION DATA SHEET

## APPLICATION INFORMATION

Application Type:: REGULAR Subject Matter:: UTILITY

CD-ROM or CD-R?:: NONE

Title:: FILM-FORMING COMPOSITIONS AND

METHODS

Attorney Docket Number:: 57339US002

Total Drawing Sheets::

## INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: China

Status:: FULL CAPACITY

Given Name:: Danli Family Name:: Wang

City of Residence:: Shoreview

State or Province of Residence::

Country of Residence::

Minnesota

United States

Street of Mailing Address:: P.O. Box 33427

City of Mailing Address:: St. Paul

State or Province of Mailing Address:: Minnesota
Country of Mailing Address:: United States

Postal or Zip Code of Mailing Address:: 55133-3427

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: United States

Status:: FULL CAPACITY

Given Name:: Matthew

Middle Name:: T.

Family Name:: Scholz

City of Residence:: Woodbury
State or Province of Residence:: Minnesota

Country of Residence:: United States

Street of Mailing Address:: P.O. Box 33427

City of Mailing Address:: St. Paul

State or Province of Mailing Address:: Minnesota

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

**United States** 55133-3427

**INVENTOR** 

Dong-Wei

Woodbury

Minnesota

St. Paul

Minnesota

**United States** 

P.O. Box 33427

Zhu

**United States** 

**FULL CAPACITY** 

Applicant Authority Type::

Primary Citizenship Country::

Status::

Given Name::

Family Name::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

**Applicant Authority Type::** 

Postal or Zip Code of Mailing Address::

INVENTOR

55133-3427

**United States** 

Primary Citizenship Country::

Status::

Given Name::

Middle Name:: M.

Family Name:: City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

**United States FULL CAPACITY** 

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Lu

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